TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT (Under 37 CKRP197(b) or 1.97(c))						Docket No. 19365-098425			
In Re A	pate ation Of	f: TAME SE	P 0.1 2006 E		.				
Application No. Filing Date Examiner Customer No. Group Art Unit Confirm						Confirmation No.			
10/	10/541,106 06/30/2005		WHITE	E 28886		4298			
Title:	RECLINER	ASSEMBLY FOR A	AN AUTOMOTIVE VEHICLE	SEAT HAVING	A FLOATING (CAM			
	-		Address to: Commissioner for Pater P.O. Box 1450 Alexandria, VA 22313-1						
			37 CFR 1.97(b)			•			
1. 🔟	The Information Disclosure Statement submitted herewith is being filed within three months of the filing of a national application other than a continued prosecution application under 37 CFR 1.53(d); within three months of the date of entry of the national stage as set forth in 37 CFR 1.491 in an international application; before the mailing of a first Office Action on the merits, or before the mailing of a first Office Action after the filing of a request for continued examination under 37 CFR 1.114.								
			37 CFR 1.97(c)						
2. 🛚	The Information Disclosure Statement submitted herewith is being filed after the period specified in 37 CFR 1.97(b), provided that the Information Disclosure Statement is filed before the mailing date of a Final Action under 37 CFR 1.113, a Notice of Allowance under 37 CFR 1.311, or an Action that otherwise closes prosecution in the application, and is accompanied by one of:								
☐ the statement specified in 37 CFR 1.97(e);									
OR									
	★ the f	ee set forth in 37 CF	FR 1.17(p).						

IPE								
TRANSMITE	Docket No. 19365-098425							
In the Application of	SEP 01	631						
Application No.	Filing Date 74 PADEN	Examiner	Customer No.	Group Art Unit	Confirmation No.			
10/541,106	06/30/2005	WHITE	28886	3636	4298			
Title: RECLINER	ASSEMBLY FOR AN AU	JTOMOTIVE VEHIC	LE SEAT HAVING	A FLOATING (C AM			
	(Only complete	Payment of F		CER 1 17(n))				
 A check in the amount of is attached. The Director is hereby authorized to charge and credit Deposit Account No. 50-1759 as described below. Charge the amount of \$180.00 Credit any overpayment. Charge any additional fee required. Payment by credit card. Form PTO-2038 is attached. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. Certificate of Transmission by Facsimile* Certificate of Mailing by First Class Mail I hereby certify that this correspondence is being deposited 								
account is being facsimile transmitted to the United States Patent and Trademark Office (Fa (Date)			with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on (Date)					
	Signature		Signature of Per L.w. A	son Mailing Correspo	ondence			
Typed or P	rinted Name of Person Signing Ce	ertificate	Typed or Printed Name		ertificate			
Robin W. Asher, Reclark Hill PLC 500 Woodward Aver Suite 3500 Detroit, MI 48226-3 (313) 965-8300	nue		i: 8/25/06					
CC:		·						

THE UNITED TENT AND TRADEMARK OFFICE

Group Art Unit:

3636

Applicant:

Tame

Serial No:

10/541,106

Filing Date:

June 30, 2005

Title:

RECLINER ASSEMBLY FOR AN AUTOMOTIVE VEHICLE

SEAT HAVING A FLOATING CAM

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Mail Stop Non-Fee Amendment Commissioner for Patents PO Box 1450 Alexandria, VA 22313-1450

Dear Sir:

This statement and Form PTO-1449 are submitted pursuant to the provisions of 37 CFR 1.97 and 1.98(a) as a means of complying with the requirements of 37 CFR 1.56 with respect to the above-captioned patent application.

If the Examiner has any questions regarding this Information Disclosure Statement or patent application, the Examiner is invited to contact the undersigned.

Respectfully submitted,

By:

Robin W. Asher

Registration No, 41,590

CLARK HILL PLC

500 Woodward Avenue, Ste., 3500

Detroit, MI 48226-3435

313-965-8300

Attorne Docket

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(Use several sheets if necessary)				Docket Number (Optional) Applicant(s) Applicant(s) Applicant(s)					
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